

City of Nicholson
175 Lakeview Drive
Nicholson, GA 30565

**Electrical
Permit Application**

- Residential
- Commercial
- Alteration/Repair

Date: ____ / ____ / ____ Permit No. _____

ESTIMATED VALUE (Labor and Materials): \$ _____

JOB SITE ADDRESS: _____ **PROJECT NAME:** _____ **LOT/ SUITE #:** _____

Property Use: _____ Zoning Class.: _____

Job Description: _____

Property Owner	Name: _____		
	Address: _____	State: _____ Zip: _____	Phone: _____ Email: _____

Trade Contractor	Name: _____		State License No.: _____
	Address: _____	State: _____ Zip: _____	Phone: _____ Email: _____

SERVICE INFORMATION	CHECK IF APPLICABLE
VOLTAGE: _____ PHASE: _____ AMPS: _____	<input type="checkbox"/> TEMPORARY POWER POLE
CONDUCTOR TYPE: _____	<input type="checkbox"/> POWER POLE
CONDUCTOR SIZE: _____	<input type="checkbox"/> CHANGE OF SERVICE
METHOD OF ENTERING BUILDING	<input type="checkbox"/> CHANGE PANEL BOX
<input type="checkbox"/> ABOVE GROUND <input type="checkbox"/> UNDERGROUND	<input type="checkbox"/> OTHER (EXPLAIN) _____

SERVICE PROVIDER: _____ **NUMBER OF CIRCUITS:** _____

Notice: No changes shall be made from that which is stated in this application, or in attached plans and specifications, except by submitting a revised application, plans and/or specifications and receiving approval of the Chief Building Inspector for such change. Granting of a permit shall not be construed as a permit for or an approval of any violation of the Building Code or any other state or local law regulating construction or the performance of construction. I hereby certify that I have read and examined this application and the information provided herein is true and correct. I further certify that all construction will comply with the Minimum Building Codes.

Signature of Licensed Cardholder: _____ Date: _____

FOR OFFICE USE ONLY Accepted by: _____

Construction Type: _____ Occupancy: _____

Administrative Fee: \$ _____	Plan Review Fee: \$ _____	Permit Fee: \$ _____	CC Fee: \$ _____	Total Fee: \$ _____
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